|   |   |   |                 |                                   |              |                  |                | Application or Docket Number |                        |               |                     |  |  |
|---|---|---|-----------------|-----------------------------------|--------------|------------------|----------------|------------------------------|------------------------|---------------|---------------------|--|--|
| PATENT APPLICATION FEE DETERMINATION RECO<br>Effective October 1, 2000  |   |   |                 |                                   |              |                  |                |                              | O                      | 9/            | 184                 | 289  |  |
| CLAIMS AS FILED - PART I  |   |   |                 |                                   |              |                  | CMAL           | •                            | AITITY .               | <del>(-</del> | OTHE                | ~~~  |  |
| _   |   |   |                 |                                   |              | umn 2) TY        |                | MALL ENTITY TYPE             |                        | OR            |                     | THÂN<br>ENTITY                                   |  |
| TOTAL CLAIMS  |   |   |                 |                                   | W. Side Area |                  | RA             | ΓĒ                           | FEE                    | 7             | RATE                | FEE  |  |
| FOR .   |   |   | NUMBERGILED     |                                   | NUMBER EXTRA |                  | BASIC          | FEE                          | 355.00                 | OR            | BASIC FEE           | 710.00   |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | A minus 20=     |                                   | . 2          |                  | xs             | 9=                           | 186                    | OR            | X\$18=              |  |  |
| INDEPENDENT CLAIMS  |   |   | 5 minus 3 =     |                                   | 2            |                  | X40            | <br>)=                       | 80                     | OR            | X80=                |  |  |
| М   | ULTIPLE DEPE                                    | NDENT CLAIM P                             | RESENT          |                                   |              |                  |                |                              |                        | ┧┈            |                     | <del>                                     </del> |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |   |   |                 |                                   |              |                  | +13            | 5=                           |                        | OR            | +270=               |  |  |
| •   |   |   |                 |                                   |              |                  | TOT            | AL                           |                        | OR            | TOTAL               |  |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)   |   |   |                 |                                   |              |                  | SMA            | 111                          | ENTITY                 | OR            | OTHER<br>SMALL      |  |  |
|   | CLAIMS  |   | 200             | HIGH                              | EST          | OMALC            |                | ADDI-                        | 7                      | O.MALC.       | ADDI-               |  |  |
| AMENDMENT A   | 14.5 (1.50.0)                                   | REMAINING<br>AFTER<br>AMENDMENT           |                 | PREVIO                            | DUSLY        | PRESENT<br>EXTRA | RAT            | Έ                            | TIONAL<br>FEE          |               | RATE                | TIONAL   |  |
|   | Total   | . 13                                      | Minus           | 1.3                               | Ž            | - /              | X\$ 9          | )=                           | ree                    | OR            | X\$18=              | ,  |  |
|   | independent                                     | . 3                                       | Minus           |                                   | 5            | =                | X40            | _                            | /                      | 4             | X80=                | /  |  |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                 |                                   |              |                  | $\vdash$       |                              | -                      | OR            | /                   | - <del>-</del>                                   |  |
|   |   |   |                 |                                   |              |                  | +135           |                              |                        | OR            | +270=               |  |  |
|   |   |   |                 |                                   |              |                  | TO<br>Addit. 1 | TAL                          |                        | OR            | TOTAL<br>ADDIT, FEE |  |  |
| _   | (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST |   |                 |                                   |              |                  |                |                              |                        |               |                     |  |  |
| AMENOMENT B   |   | REMAINING<br>AFTER<br>AMENDMENT           |                 | NUMI<br>PREVIO                    | BER<br>DUSLY | PRESENT<br>EXTRA | RAT            | Ε                            | ADDI-<br>TIONAL<br>FEE |               | RATE                | ADDI-<br>TIONAL<br>- FEE                         |  |
|   | Total   | •   | Minus           |                                   |              | =                | X\$ 9          | _                            |                        | OR            | X\$18=              | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,          |  |
|   | Independent                                     |   | Minus           | •••                               |              | =                | X40            | _                            |                        |               | X80=                |  |  |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDEN         |   |                 |                                   | CLAIM        |                  | N. 10          | $\dashv$                     |                        | OR            | 7002                |  |  |
|   |   |   |                 |                                   |              |                  | +135           | 1                            |                        | OR            | +270=               |  |  |
|   |   |   |                 |                                   |              |                  | ADDIT, F       | EE                           |                        | OR            | TOTAL<br>ADDIT, FEE |  |  |
|   |   |   |                 |                                   |              |                  |                |                              |                        |               |                     |  |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | Paramagadas ing | HIGHI<br>NUME<br>PREVIO<br>PAID F | BER<br>BUSLY | PRESENT<br>EXTRA | RATE           | =                            | ADDI-<br>TIONAL<br>FEE |               | RATE                | ADDI-<br>TIONAL<br>FEE                           |  |
| WQ  | Total   | •   | Minus           | ••                                |              | =                | X\$ 9:         |                              |                        | OR            | X\$18=              | 1.32   |  |
| ME  | Independent                                     | •   | Minus           | ***                               |              | =                | X40=           | +                            |                        |               | X80=                |  |  |
| ۲   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                 |                                   |              |                  |                | 4                            |                        | OR            | ∧o∪=                |  |  |
|   |   |   |                 |                                   |              |                  |                |                              |                        | OR            | +270=               |  |  |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE  ADDIT. FEE |   |   |                 |                                   |              |                  |                |                              |                        |               |                     |  |  |
|   |   | mber Previously Pa<br>ber Previously Paid |                 |                                   |              |                  |                |                              | ropriate box           |               |                     |  |  |

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